

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/474,032	12/28/99	455	2749	101448

APPLICANT

XIAOLIN LU, MIDDLETOWN, NJ; XIAOXIN QIU, BRIDGEWATER, NJ.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

none yes

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

none yes

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

none yes

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/08/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>yes</u>		NJ	9	20	2
Examiner's Initials _____			Initials _____			

ADDRESS	OLIFF & BERRIDGE PLC P.O. BOX 19928 ALEXANDRIA VA 22320
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TITLE	NETWORK TRAFFIC REGULATION
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FILING FEE RECEIVED	FEE: Authority has been given in Paper	<input type="checkbox"/> All Fees
\$760	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees (Filing)
	NO. _____ for the following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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Bib Data Sheet

CONFIRMATION NO. 1769

<b>SERIAL NUMBER</b> 09/474,032	<b>FILING OR 371(c) DATE</b> 12/28/1999 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2664	<b>ATTORNEY DOCKET NO.</b> 101448
<b>APPLICANTS</b> XIAOLIN LU, MIDDLETOWN, NJ; XIAOXIN QIU, BRIDGEWATER, NJ;  <b>** CONTINUING DATA *****</b> <i>nm</i>  <b>** FOREIGN APPLICATIONS *****</b> <i>nm</i>  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/08/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>psk</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 20
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 26652				
<b>TITLE</b> NETWORK TRAFFIC REGULATION				
<b>FILING FEE RECEIVED</b> 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other, _____ <input type="checkbox"/> Credit	